

402824 CC1

<b>CyberSource</b>	Account ID: wpix_acct
User: sedwards Support Center Log Out	<b>Transaction Receipt</b> <a href="#">Page help</a> <a href="#">Page feedback</a>
Virtual Terminal Process Orders Settings Decision Manager Tools & Settings Transaction Search Reports Account Management	The Virtual Terminal transaction succeeded.
<b>Return Codes</b>	
Result Code	SOK - Request was processed successfully.
Authorization Code	190150
AVS Code	V - Match. Name, billing address, and postal code all match.
Reference Number	00326692V90WCXQW
Request ID	25187294136501760561RQ
CyberSource Merchant ID	wticwcct
<b>Payment Information</b>	
Payment Type	Credit Card
Total Amount	71718.75 USD
Currency	United States: Dollar
Transaction Source	Internet Commerce
Transaction Type	Sale
Credit Card Type	American Express
Credit Card Number	#####1014
<b>Customer Information</b>	
Customer ID	
Name	BRUCE MENTZER
Company	
Street Address 1	
Street Address 2	
City, State Postal Code	Towson, MD 21286
Country	United States
Phone Number	4108257034
Email Address	null@cybersource.com
<b>Order Information</b>	
Order or Merchant Reference Number	1349709291979
<input type="button" value="New Transaction"/>	<input type="button" value="Print Single Receipt Format"/>
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402824 CC2

<b>CyberSource</b>	Account ID: wpix_acct																																																						
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Virtual Terminal Process Orders Settings Decision Manager Tools & Settings Transaction Search Reports Account Management	<h2>Transaction Receipt</h2> <p>The Virtual Terminal transaction succeeded.</p> <p><a href="#">Page help</a> <a href="#">Page feedback</a></p> <table><tr><td colspan="2"><b>Return Codes</b></td></tr><tr><td>Result Code</td><td>SOK - Request was processed successfully.</td></tr><tr><td>Authorization Code</td><td>125102</td></tr><tr><td>AVS Code</td><td>V - Match. Name, billing address, and postal code all match.</td></tr><tr><td>Reference Number</td><td>00363735091EZ3TA</td></tr><tr><td>Request ID</td><td>7518852282410176056177</td></tr><tr><td>CyberSource Merchant ID</td><td>wticwctt</td></tr><tr><td colspan="2"><b>Payment Information</b></td></tr><tr><td>Payment Type</td><td>Credit Card</td></tr><tr><td>Total Amount</td><td>108800.00 USD</td></tr><tr><td>Currency</td><td>United States: Dollar</td></tr><tr><td>Transaction Source</td><td>Internet Commerce</td></tr><tr><td>Transaction Type</td><td>Sale</td></tr><tr><td>Credit Card Type</td><td>American Express</td></tr><tr><td>Credit Card Number</td><td>#####1014</td></tr><tr><td colspan="2"><b>Customer Information</b></td></tr><tr><td>Customer ID</td><td></td></tr><tr><td>Name</td><td>BRUCE MENTZER</td></tr><tr><td>Company</td><td>Independence USA PAC</td></tr><tr><td>Street Address 1</td><td>600 Fairmount Avenue</td></tr><tr><td>Street Address 2</td><td></td></tr><tr><td>City, State Postal Code</td><td>Towson, MD 21286</td></tr><tr><td>Country</td><td>United States</td></tr><tr><td>Phone Number</td><td>4108257034</td></tr><tr><td>Email Address</td><td>null@cybersource.com</td></tr><tr><td colspan="2"><b>Order Information</b></td></tr><tr><td>Order or Merchant Reference Number</td><td>1349709291979</td></tr></table> <p><input type="button" value="New Transaction"/> <input type="button" value="Print Single Receipt Format"/></p>	<b>Return Codes</b>		Result Code	SOK - Request was processed successfully.	Authorization Code	125102	AVS Code	V - Match. Name, billing address, and postal code all match.	Reference Number	00363735091EZ3TA	Request ID	7518852282410176056177	CyberSource Merchant ID	wticwctt	<b>Payment Information</b>		Payment Type	Credit Card	Total Amount	108800.00 USD	Currency	United States: Dollar	Transaction Source	Internet Commerce	Transaction Type	Sale	Credit Card Type	American Express	Credit Card Number	#####1014	<b>Customer Information</b>		Customer ID		Name	BRUCE MENTZER	Company	Independence USA PAC	Street Address 1	600 Fairmount Avenue	Street Address 2		City, State Postal Code	Towson, MD 21286	Country	United States	Phone Number	4108257034	Email Address	null@cybersource.com	<b>Order Information</b>		Order or Merchant Reference Number	1349709291979
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## AGREEMENT FORM FOR NON-CANDIDATE/ISSUE ADVERTISEMENTS

<b>Station and Location:</b>	<b>Date:</b>
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I, David Grill  
do hereby request station time concerning the following issue:

Independence USA PAC

Broadcast Length	Time of Day, Rotation or Package	Days	Class	Times per Week	Number of Weeks
	VARIES				

**Total Charges:**      \$                      GROSS

This broadcast time will be used by: Independence USA PAC

**Does the programming (in whole or in part) communicate "a message relating to any political matter of national importance?"**

☐ Yes                      ☐ No

For programming that "communicates a message relating to any political matter of national importance," list the name of the legally qualified candidate(s) the programming refers to, the office(s) being sought and the date(s) of the election(s) (if applicable):

For programming that "communicates a message relating to any political matter of national importance," attach Agreed Upon Schedule (Page 3)

I represent that the payment for the above described broadcast time has been furnished by:

Independence USA PAC

and you are authorized to announce the time as paid for by such person or entity. The entity furnishing the payment, if other than an individual person, is:


☐ a corporation; ☒ a committee; ☐ an association; ☐ or other unincorporated group.

The names, offices, and addresses of the chief executive officers, directors, and/or authorized agents of the entity are named below (may be attached separately):

**THIS STATION DOES NOT DISCRIMINATE OR PERMIT DISCRIMINATION ON THE BASIS OF RACE OR ETHNICITY IN THE PLACEMENT OF ADVERTISING.**

I agree to indemnify and hold harmless the station for any damages or liability, including reasonable attorney's fees, that may ensue from the broadcast of the above-requested advertisement(s). For the above-stated broadcast(s), I also agree to prepare a script, transcript, or tape, which will be delivered to the station at least \_\_\_\_\_ before the time of the scheduled broadcasts.

**TO BE SIGNED BY ISSUE ADVERTISER**

10/31/12  
Date
  
Signature
212-205-0170  
Contact Phone Number

**TO BE SIGNED BY STATION REPRESENTATIVE**

☐ Accepted
 ☐ Accepted in Part
 ☐ Rejected

\_\_\_\_\_  
Signature
\_\_\_\_\_  
Printed Name
\_\_\_\_\_  
Title